

FINANCIAL AFFIDAVIT

IN SUPPORT OF REQUEST FOR ATTORNEY, EXPERT OR OTHER COURT SERVICES WITHOUT PAYMENT OF FEE

IN UNITED STATES

☐ MAGISTRATE☐ DISTRICT☐ APPEALS COURT or☐ OTHER PANEL (Specify below)

IN THE CASE OF

V.S.

FOR

AT

LOCATION NUMBER

PERSON REPRESENTED (Show your full name)

- 1 ☐ Defendant—Adult
2 ☐ Defendant - Juvenile
3 ☐ Appellant
4 ☐ Probation Violator
5 ☐ Parole Violator
6 ☐ Habeas Petitioner
7 ☐ 2255 Petitioner
8 ☐ Material Witness
9 ☐ Other

DOCKET NUMBERS

Magistrate

District Court

Court of Appeals

CHARGE/OFFENSE (describe if applicable & check box →)

☐ Felony☐ Misdemeanor

ANSWERS TO QUESTIONS REGARDING ABILITY TO PAY

EMPLOY-
MENTAre you now employed? ☐ Yes ☐ No ☐ Am Self-Employed

Name and address of employer: _____

IF YES, how much do you
earn per month? \$ _____IF NO, give month and year of last employment
How much did you earn per month? \$ _____If married is your Spouse employed? ☐ Yes ☐ NoIF YES, how much does your
Spouse earn per month? \$ _____If a minor under age 21, what is your Parents or
Guardian's approximate monthly income? \$ _____OTHER
INCOMEHave you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form
the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? ☐ Yes ☐ No

RECEIVED

SOURCES

IF YES, GIVE THE AMOUNT
RECEIVED & IDENTIFY
THE SOURCES

\$

ASSETS

CASH

Have you any cash on hand or money in savings or checking accounts? ☐ Yes ☐ No IF YES, state total amount \$ _____PROP-
ERTYDo you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and
clothing)? ☐ Yes ☐ No

VALUE

DESCRIPTION

IF YES, GIVE THE VALUE AND \$
DESCRIBE ITOBLIGATIONS &
DEBTS

DEPENDENTS

MARITAL STATUS

- ☐ SINGLE
☐ MARRIED
☐ WIDOWED
☐ SEPARATED OR
DIVORCED

Total
No. of
Dependents

List persons you actually support and your relationship to them

DEBTS &
MONTHLY
BILLS(LIST ALL CREDITORS,
INCLUDING BANKS,
LOAN COMPANIES,
CHARGE ACCOUNTS,
ETC.)APARTMENT
OR HOME:

Creditors

Total Debt

Monthly Paym.t.

I certify under penalty of perjury that the foregoing is true and correct. Executed on (date) _____

SIGNATURE OF DEFENDANT
(OR PERSON REPRESENTED)